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Application or Docket Numb r

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			30					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3 () minus 20=		. 10			X\$ 9=	90	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		Ø			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		′ 🗖			+135=		OR	+270=	
• If	th difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	1	TOTAL	1640	OR	TOTAL	
CLAIMS AS AMENDED - PART II								,	, - ,	OTHER		
(Column 1)			(Column : HIGHEST			(Column 3)	٠ .	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AIM			X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3								ADDII. PEE (ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PA(D	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	• NTATION OF MI	Minus	***	CL AIM	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	INTATION OF MI	JETIPLE DEF	ENDEN	CLAIM		' [+135=		OR	+270=	•
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
	Independent	dependent		T CL AIM]=		X40=		OR	X80=		
<u></u>	THIS THE CENTRAL CONTROL OF MICE AND AND ADDRESS OF THE CONTROL OF							+135=		OR	+270=	
••	lf the "Highest Nu	mn 1 is less than t mber Pr viously P	aid For IN THI	S SPACE	is less tha	n 20, enter "20."	. L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
•••	** If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											